

Industry Sector Analysis FRANCE

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Home Health Care and Rehabilitation Products and Equipment

Alain Levy PUG 09/30/2000

SUMMARY

In France, there are 400 specialized home healthcare stores and nearly 7,000 pharmacies which offer home healthcare products. The market is expected to reach USD 947 million by the end of the year 2000. Imports from the United States are forecast to reach USD 125 million, or 44 percent of total imports.

The best sales prospects for the home healthcare market include products such as wheelchairs, positioning systems, and nutritional equipment. Healthcare professionals are highly optimistic about new technologies such as telemedicine and remote monitoring systems, which are expected to have a major impact on the medical care provided in France.

The recent growth of American medical procedures and techniques in France such as outpatient, same-day, surgery should benefit American home healthcare product manufacturers. Products used by the elderly and home medical care products will be in increasing demand in the future. Additionally, the current strain on public expenditures has re-emphasized the importance of price/quality and cost-effectiveness factors in medical products.

A number of factors are responsible for the continued success of American manufacturers of home healthcare products in France. The United States represents almost 50 percent of world demand for home healthcare products and consequently exerts a large influence on the global market. American products enjoy a positive reputation in France, as they are perceived to feature the latest technology and to be of high quality and well serviced.

A. MARKET HIGHLIGHTS & BEST PROSPECTS

* Market Profile

The home healthcare market consists of many product categories: aids to daily living, IV therapy, wound care, incontinence, home testing, telemedecine, medical software, apparel, bathroom equipment, wheelchairs and accessories, communication devices, medical beds, exercise equipment, hygiene products, respiratory products, cleaning products, traction products, nursing supplies, orthopedic appliances, nutritional equipment, wound care supplies, positioning systems and support, and orthotics/prosthetics.

The French market for home healthcare is constantly growing, reflecting increasingly sophisticated applications. Since different products within the home healthcare market are at various stages of maturity and as the healthcare system evolves, projected growth rates vary considerably throughout the industry.

The French home healthcare market was valued at USD 877 million in 1999, and is expected to reach USD 947 million in 2000. The average growth rate for the period 1999-2001 is projected to be 8 percent. Imports, which amounted to USD 262 million in 1999, are expected to grow 9 percent annually during the same period. In 1999, American products accounted for 44 percent of total imports, or USD 115 million.

The future of healthcare will be shaped by a number of factors including a change in the pattern of needs, medical breakthroughs in genetic and predictive medicine, and increased requirements from the public in terms of quality and efficiency. French patients now expect different and more diverse types of medical treatment, as well as more flexible hospital management systems. Home healthcare is rapidly becoming a part of the network of health organizations, by offering integrated services.

The home healthcare market is excellent and continues to grow for a number of reasons. France is aging rapidly, and in 2020, 25 percent of the population will be over 60 years old. As life expectancy increases and the number of elderly citizens grows, there will be more people who require medical and who prefer to remain at home or for whom home care is the most effective and cost-efficient.

In addition, in France, the number of car accidents is substantial. In France, the percentage of deaths from car accidents is two times greater than in the United States. The number of persons injured in car accidents is also high, and they account for a significant portion of the home healthcare market. Many of these are children or young adults who will require care for the remainder of their lives. In a general context, more and more patients are choosing to remain at home, where they can enjoy a more comfortable and familiar environment.

Technological advances have also contributed to the growth of the home healthcare market. Care that was previously only available in hospitals can now take place in the home. As French hospitals have become more specialized, their focus is on technical expertise. Some hospitals have become more willing to release patients sooner if duties, such as post-surgical care, can be performed outside hospitals. As an example, medical progress now permits tube feeding of premature babies at home so they may be leave the hospital sooner. This emphasis on technical specialization will continue to decrease the length of time patients stay in the hospital.

*Basic facts about the French population, the medical profession in France, and causes of death

Population analysis: France and the United States

	FRANCE	USA	
Population (millions)	59	275	
Births (per thousand people)	13	15	
Mortality (per thousand people)	9	8	
Infant mortality (per thousand births)	5	7	
Life expectancy	77	77	

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Source: C.N.A.M.T.S.

French healthcare professionals are divided as follows:

Practicing Doctors: 177,138
Dentists: 39,471
Pharmacists: 27,836
Pharmacies: 22,590
State Qualified Nurses: 294,268

-Working in hospitals: 244,242 (83 percent) -In private practice: 50,026 (17 percent)

In 1998, 530,139 people died in France. The main causes were:

- Cardiovascular infections- Cancer32 percent28 percent

- External causes

(including suicides and accidents) 8 percent

France has 3,161 hospitals, of which 1,048 are public (with 323,098 beds) and 2,113 are private (with 175,884 beds).

*The healthcare system in France:

The following factors influence market demand in the French healthcare system:

- Virtually the entire population of France is covered by the "Securite Sociale" or "Social Security", which is France's national health program;
- The government has created a framework for healthcare in which public and private hospitals coexist to provide the population with easy access to the necessary care and treatment;
- Within this framework, both public and private hospitals are subject to government approval for where they are located and major medical equipment investments;
- For each medical specialty, there are bed/population ratios which have a direct impact on these approvals;
- The individual patient is free to choose treatment in either a public or private hospital.

The French government, like other governments of developed countries, has imposed controls on health expenditures. In 1995, radical measures (the Juppe reform, named after the Prime Minister at that time) were introduced. France is reforming management of its national health program, examining its health expenditures, and reviewing hospital and clinic structures. Parliament sets annual spending targets that must not be exceeded. A new healthcare management structure has established 24 regional hospital authorities for planning healthcare needs and setting hospitals annual budgets. These authorities are working with individual hospitals to define objectives and requirements with the aim of creating pools of excellence by merging hospitals – public and private alike – and closing, if necessary, those establishments whose occupancy rate is lower than 60 percent. To allocate funding, a system of accreditation is used to identify efficient hospitals.

To better track healthcare spending, and ultimately to be able to take appropriate sanctions against hospitals and doctors that do not succeed in controlling expenditures, all social security affiliates (95 percent of the population) will soon be given a smart card. This card, called "Sesame-Vitale," will enable the electronic transfer of medical records and prescriptions to healthcare funds responsible for reimbursement. The Sesame-Vitale card will be at the heart of the health network (Réseau Sante-Social RSS) that should link through a secured computer network each individual patient with all kinds of healthcare providers (e.g., public hospitals, private clinics, general practitioners, specialized doctors, and nurses).

Within hospitals, changes are underway regarding the number of beds available for short-and long-stays. The tendency is toward a decline in the number and duration of short-stays and an increase in number and duration of long-stays. Due to technological advances, patients who would have previously had treatment requiring a few days' stay at the hospital can now return home earlier, decreasing the length of short-stays. Furthermore, emergence of alternatives to traditional short-stays in hospitals, such as ambulatory medicine, home-testing, and home care has also contributed to the decreasing need for short-stay beds.

Although the development of such alternatives has caused a decline in the market for hospital-care equipment, it has created a demand for a whole new range of medical equipment. For example, disposable medical products for home use will increase substantially as a result of decreasing hospitalization procedures, and the preference of senior citizens to remain at home for medical care. Consequently, the demand for medical equipment and products which facilitate home care will continue to increase.

"Hospitalisation à Domicile" (HAD) is a system of care within France which allows patients to receive medical care at home. HAD is the home care department of a given public hospital and renders treatment in a number of areas including cancer treatment, AIDS, post-natal care, obesity, multiple sclerosis, ulcers, depression, chemotherapy, and paralysis. An adult or infant can be admitted to HAD after a consultation at the hospital, an actual hospitalization, or after an agreement between the treating physician and the HAD coordinator.

HAD caretakers are responsible for hospital duties such as lab exams, ergotherapy, physiotherapy, x-rays, as well as the distribution of medicine and the rental of all necessary equipment. HAD care is available 24 hours a day, and is supervised by a physician chosen by the patient.

The "Assistance Publique-Hopitaux de Paris" (AP-HP), the largest group of public hospitals in Europe with 50 hospitals, 750 types of medical service and 88,125 employees, offers 28,134 "in-house" beds and only 1,050 HAD beds. According to French regulations, in order to increase the HAD beds it offers by one, AP-HP, like any other public hospital in France, would be forced to cut back on two of its own in-house beds. As AP-HP hospitals are public and have a fixed annual budget, reductions in in-house beds will not mean they will be allowed to fire employees or easily reassign them to HAD care. Therefore, by increasing HAD activity, their in-house costs remain almost the same, while new costs are incurred

In addition, hospital managers are understandably reluctant to reduce their in-house bed numbers, as it affects hospital prestige. Consequently, there are currently only 4,000 HAD beds in France. In such a context, there has been little incentive to promote HAD care in France.

Another category of home healthcare in called "Maintien à Domicile" (MAD). Patients within this category typically require oxygen therapy, perfusion, or intra-veinous nutrition. It is difficult to determine the exact number of patients within this category, but industry insiders have estimate it at 300,000. MAD treatment is organized by professional networks that coordinate the activities among hospitals, general practitioners, nurses, and pharmacies/home healthcare stores.

There are 150,000 medical beds used in France, of which 95 percent are rented (usually by the patient). The remaining 5 percent, which are purchased, require prior approval from the national health program. There are

an estimated 70,000 wheelchairs sold each year in France. Generally, these chairs are used for a five-year period, and are sometimes rented by several patients or used by one permanently disabled person. Almost 20 percent (50,000) of the nurses in France work in private practice, in the homes of MAD patients.

* Statistical Data

In USD Millions	1998	1999	2000	Projected Ave. following 2 years (i percent)
Import Market	238	262	286	9
Local Production	700	753	806	7
Exports	127	138	149	8
Total Market	807	877	947	8
Imports from U.S. Exchange rates 1USD = 6.5 FF	105	115	125	9

^{*} estimated

Inflation rate assumed: 2 percent

The above statistics are unofficial estimates.

Estimated 1999 import market shares: (in percentage terms)

United States: 44 Germany: 14 Italy: 10

United Kingdom: 8

Receptivity code (1-5): 4

Range: 5 (extremely receptive) to 1 (not receptive)

* Best Sales Prospects

Sales prospects for all innovative home healthcare products in France are positive. Although critical treatment such as surgery will always be performed in hospitals, there is a growing demand for home healthcare products and equipment used for basic every day health care. Products such as nutrition pumps, wheelchairs, hygiene products, perfusion equipment, and positioning systems are becoming increasingly important in home care.

Patient and medical personnel safety is of growing concern to both the medical profession and the public. Products which have the best sales prospects are those which have strict personal safety requirements. This is a direct result of concerns regarding HIV and all other infectious diseases. Factors such as hygiene, sterilization, and sterile packaging for home healthcare products are in great demand due to an increasing emphasis on safety.

Some home healthcare products sold for private home use in the United States can only be sold to medical professionals in France. For example, a lumbar traction device can be sold to the general public in the U.S.

with simply an instructional video and user's guide. In France, such equipment is more strictly regulated and can only be found in a physiotherapist's office and used under medical supervision.

Finally, the French market is particularly receptive to new and innovative products in the areas of home testing ("self-diagnostics") and remote monitoring systems. With increased technology, doctors can now monitor the health of patients while the patient remains at home. The patient will only go to the hospital if the doctor receives data that shows a change in the patient's condition on the monitoring equipment located at the hospital.

B. COMPETITIVE ANALYSIS

* Domestic Production

Domestic production is comes from both French-owned companies and subsidiaries of multinational corporations. U.S. companies have recently bought large French companies such as Le Couviour (Hillrom), which manufactures medical beds, and Poirier (Invacare), which manufactures wheelchairs. The French home healthcare industry is comprised of approximately 75 companies employing 1,000 people. Most of these firms are small or medium-sized.

Home healthcare product manufacturers mainly sell to a specific subsector market. Their small size necessitates a total specialization of their activities. Globally, French home healthcare manufacturers export 14 percent of their production.

* Third-Country Imports

The home healthcare marketplace is truly global. In order to capitalize on comparative trade advantages, major players often produce equipment components in several different countries, and assemble the final products in a third country. As a result, the origin of certain home healthcare equipment is sometimes difficult to determine.

The overwhelming majority of home healthcare products used in France are imported. Imports from the United States represent 44 percent of the total import market. Germany is the second largest exporter to France with 14 percent of the French import market. The United Kingdom and Italy share the remainder of the import market. The French market is easily accessible to foreign products. The high import percentage indicates that purchasers give priority to the quality and special advantages of a product over the country of origin.

German companies have been successful because of their solid reputation for quality. Also, Germany's proximity to France reduces transportation costs and shipping time and facilitates after-sales service. In addition, German imports are duty-free, as they originate from an EU member-state.

Finally, it is important to note that the import statistics for American products in France are slightly distorted because of the re-export phenomenon. Many French distributors import American-made home healthcare products and re-export them to other countries, primarily French-speaking Africa. This phenomenon tends to overstate France's import and export figures.

* U.S. Market Position

American imports represent a solid 44 percent of the French home healthcare market. Success of American companies in this market is based on high quality, innovative technology and comprehensive after-sales service. To achieve these ends, American firms dedicate a high proportion of their earnings to research and

development. Feedback from patients and medical professionals is constantly integrated into product design. American-made home healthcare products have an excellent product image in the French market place.

The American market share should be considered as quite significant considering the advantage German exporters have over their U.S. counterparts, sharing a common border and E.U. membership. The home healthcare market is much more developed in the United States than in France. One reason for this fact is the difference in health care systems in the two countries. The U.S. health care system is more open to home care as it is more cost-effective than hospitalization. Therefore, the U.S. system facilitates the continuing creation of new products and constant expansion of the home healthcare market.

C. END-USER ANALYSIS

End users of home healthcare products are individuals. There are approximately 304,000 home healthcare patients in France. They purchase home healthcare products in one of the 400 specialized home healthcare stores or in one of the 7,000 pharmacies that sell home care products. One third of the pharmacies in France supply home healthcare products.

D. MARKET ACCESS

* Import Climate

The import climate for American home healthcare products in France is good. There are no import barriers, and the customs duty ranges from 0.9 to 1.1 percent of the value of home healthcare products including freight and insurance.

Value-Added Tax (VAT) is due at each point of transaction at the current rate of 19.6 percent. Wheelchairs, incontinence products, and diabetic supplies are taxed at a 5.5% rate. It is required that all instructions, operation manuals and other related literature be printed in French. Substantial fines may be incurred if this requirement is not followed.

A large share of home healthcare products, both imports and local production, must bear the CE mark before being sold in France. In France, the organization in charge of applications for approval and product testing for CE marking is the "Groupement pour L'Evaluation des Dispositifs Médicaux" (G.Med). G.Med, which welcomes any correspondence in English, has an official representative in the United States. G.Med is the body selected by French authorities and reported to the European Commission as the agency that implements the European Directives on medical devices. According to these directives, as of June 16, 1998, all home healthcare products that require approval and that are imported into any or all member countries of the European Union must obtain CE marking. In France, a special regulation applies for wheelchairs. They must be tested by a separate testing and research center, the CERAH.

For those home healthcare products that do not require any official approval, G.Med may also advise American manufacturers on how to obtain voluntary certification marks, which will increase consumer confidence in the quality and safety of their products. NF-Medical (NF means "Normes Françaises," or French Standards) is the principal voluntary certification mark in France. Again, G.Med is the only organization that can issue this voluntary certification mark. On July 1, 1998 the French parliament enacted a law that establishes the French Agency for Safety of Health Products (Agence Française

de Sécurité Sanitaire des Produits de Santé - A.F.S.S.A.P.S). The A.F.S.S.A.P.S. was officially established in March 1999 and replaces a number of existing agencies by combining their activities and strengthening their authority.

Home healthcare products purchased by patients are also regulated under the "Tarif Interministériel des Prestations Sanitaires" (T.I.P.S.). In order for patients to be reimbursed by the French national health program, these home healthcare products must be listed in the T.I.P.S., which consists of a list of product descriptions (no brand names) and their respective reimbursement prices. Applications from home healthcare suppliers are evaluated by the CEPS (Comité Economique des Produits de Sante/Economic Committee for Healthcare Products). Reimbursement prices are set according to the medical and economic benefits of each product.

Distribution/Business Practices

There are four main ways for American firms to sell home healthcare products in France: hiring an agent, using a distributor, establishing a subsidiary, or working with a French manufacturer of complementary products. Exporting through a distributor or agent is the most common practice.

An agent works with retailers and end-users to promote the company's products. An agent's commission for home healthcare products is usually about 15 to 20 percent, and agents will frequently request exclusive representation. Agents are protected by a number of laws in France. If an American manufacturer wishes to terminate the business relationship with the agent prior to the expiration of the contract, the agent must first be contacted and given the opportunity to improve performance. If the American manufacturer still wishes to end the relationship after these steps have been followed, the agent has the right to retain the names of all contacts and clients, as well as related sales information. The manufacturer may purchase this information from the agent, but it is often expensive. Lastly, the manufacturer could be required to pay a severance fee, ranging from one to two years of the agent's anticipated future commissions.

A distributor purchases products from the American manufacturer, then adds a 30 to 50 percent markup to cover commissions, credit risks, after-sales service, and the cost of carrying a local inventory to meet small orders. Moreover, the distributor normally pays Value-Added Tax (VAT) and duties. French distributors also often request exclusive contracts. Many American companies use a distributor when introducing a product that employs a new technology or design. The distributor shares much of the same legal protection as the agent. If termination occurs prior to contract expiration, the usual termination fee equals the value of the distributor's expected profit margin over a two-year period. Furthermore, a home healthcare product distributor representing an American product in France controls the product's marketing strategy and image. The distributor is also not obligated to communicate market research information to the American manufacturer. It is therefore important to select a distributor who is completely in tune with the American company's goals and objectives.

Industry insiders recommend that American companies be represented by a reliable distributor or agent. The distributor or agent should be willing to provide sufficient technical information to its customers as well as to inform the manufacturer of all comments by end-users.

Establishing a subsidiary offers several advantages to the manufacturer. These include more control over distribution practices, the ability to adapt quickly to evolving needs of the market, more direct influence over personnel training, and control over unauthorized dissemination of technology for which the U.S. firm holds a patent. However, a subsidiary involves a much greater financial investment and the responsibility of maintaining assets and employees in a foreign country.

Finally, another practical approach to the market is by concluding an agreement with a French manufacturer whose knowledge of the market facilitates market access. A bilateral arrangement of this kind can often be mutually profitable because the American company typically would provide products that complement the French manufacturers own products.

* Financing

Receiving payment generally takes longer in France than in the United States. A typical payment schedule is as follows:

- 30 percent down payment at time of order
- 30 percent upon delivery
- 40 percent paid 90 days after invoicing.

In France, customers are usually billed at the end of the month.

* Key Contacts

1. Trade Associations

Union des prestataires de technologies de soins à domicile – UNIDOM –(Union of Home Healthcare Providers) 37, rue de Neuilly - BP 121

92113 Clichy Cedex Tel: (33-1) 47.56.31.37 Fax: (33-1) 47.56.30.26

Contact: Ms. Claudine Grouzelle, General Delegate

Syndicat de l'industrie des dispositifs de soins médicaux – APPAMED –(Accessories, bandages, appliances) 37, rue de Neuilly - BP 121

92113 Clichy Cedex Tel: (33-1) 47.56.30.05 Fax: (33-1) 47.37.94.54

Contact: Mr. Philippe Rouard, General Delegate

2. Official Agencies

Approval and testing:

Groupement pour l'Evaluation des Dispositifs Médicaux (G.Med)

[Group for the Evaluation of Medical Apparatus]

33, avenue du Général Leclerc

92260 Fontenay aux Roses

Tel: (33-1) 40.95.63.68 Fax: (33-1) 40.95.63.22

Contact: Mr. Frederic Guillois, Marketing Manager

G.Med has official representation in the U.S.

European Certification Partners, Inc. (E.C.P.) [Certification, Marketing, Business Services] 1100 Seventeenth Street, N.W., Suite 301 Washington, D.C. 20036

Tel: (202) 463 4210 Fax: (202) 463 4219

Contact: Mr. Eric M. Thibau, President

Home healthcare product safety:

Agence Française de Sécurité Sanitaire des Produits de Santé (A.F.S.S.A.P.S.)

143, boulevard Anatole France

93285 Saint-Denis Cedex Tel: (33-1) 55.87.30.00

Fax: (33-1) 55.87.30.32

Contact: Ms. Rosine Deniau, International Affairs

Wheelchair Testing:

Centre d'Etudes et de Recherches sur l'Appareillage des Handicapés (CERAH)

Bellevue BP 719 57147 Woippy Cedex Tel: (33-3) 87.51.30.30

Fax: (33-3) 87.51.30.36

Contact: Mr. François Pelisse, Director

Reimbursement (T.I.P.S.):

Ministry of Social Affairs
Direction de la Sécurité Sociale
Comité Economique des Produits de Santé (CEPS)
8, avenue de Ségur
75350 Paris 07 SP

Tel: (33-1) 40.56.73.76 Fax: (33-1) 43.06.30.02

Contact: Mr. Noel Renaudin, President

Patents:

Institut National de la Propriété Industrielle (I.N.P.I.) [National Institute for Patent Rights]

26 bis, rue de Saint Petersbourg

75800 Paris Cedex 08 Tel: (33-1) 53.04.53.04 Fax: (33-1) 42.93.59.30

Contact: Ms. Martine Planche, Marketing Director

3. Major Trade Magazines

France Handicap Info 36, rue Riquet Espace St. Aubin 31000 Toulouse

Tel: (33-5) 34.41.67.08 Fax: (33-5) 34.41.67.09

Contact: Mr. Stephan La Goutiese, Director

Le Quotidien du Pharmacien 140, rue Jules-Guesde 92593 Levallois-Perret Cedex

Tel: (33-1) 47.30.75.00 Fax: (33-1) 47.30.75.83

Contact: Dr. Marie-Claude Tesson Millet, Director

L'Infirmière Magazine 47, rue Saint-André-des-Arts 75006 Paris

Tel: (33-1) 43.26.58.38

Fax: (33-1) 49.09.17.66

Contact: Mr. Thierry Verret, Director

Faire Face

17, boulevard Blanqui

75013 Paris

Tel: (33-1) 40.78.69.00 Fax: (33-1) 40.78.69.33

Contact: Mr. Marc Rouzeau, Director

Plain Pied

10, rue Georges Porto Riche

75014 Paris

Tel: (33-1) 40.23.02.13 Fax: (33-1) 48.78.15.85

Contact: Mr. Christian d'Alayer, Director

Cote Seniors

14, rue de la Comedie 82000 Montauban Tel: (33-5) 63.63.36.99

Fax: (33-5) 63.20.54.89

Contact: Mr. Michel Berdheler, Director

Geriatrie Expression Santé

15, rue du Louvre, Bat. 4-ASC A

75001 Paris

Tel: (33-1) 40.41.14.40 Fax: (33-1) 40.41.14.49

Contact: Mr. Antoine Matheu, Director

Le Quotidien du Medecin 140, rue Jules-Guesde 92593 Levallois-Perret Cedex

Tel: (33-1) 47.30.75.00 Fax: (33-1) 47.30.75.83

Contact: Dr. Marie-Claude Tesson Millet, Director

Le Pharmacien de France

13, rue Ballu 75009 Paris

Tel: (33-1) 44.53.19.25 Fax: (33-1) 44.53.19.26

Contact: Ms. Marie-Josée Augé-Caumon, Director

4. Market Research Firms

TMP Worldwide 147 boulevard Haussman 75379 Paris Cedex 08 Tel: (33-1) 58.56.40.40

Fax: (33-1) 58.56.40.41

Contact: Bernard Glaser, Director

Droit & Pharmacie 12, rue de Lorraine

92300 Levallois-Perret Tel: (33-1) 55.46.91.00 Fax: (33-1) 55.46.91.01

Contact: Mr. Philippe Conquet, General Manager

JNB - Développement S.A. 42 bis rue de Bourgogne

75007 Paris

Tel: (33-1) 47.53.27.60 Fax: (33-1) 47.53.27.69

Contact: Mr. Jacques N. Biot, President

Ms. Amy Greiner, Consultant

Medi-Bridge

34, avenue de l'Europe - B.P. 136

78148 Velizy Cedex Tel: (33-1) 39.46.39.37 Fax: (33-1) 39.46.36.60

Contact: Ms. Paula Harry, International Project Manager

P.R. International 22, avenue d'Eylau

75116 Paris

Tel: (33-1) 44.05.83.00 Fax: (33-1) 47.27.77.75

Contact: Ms. Geneviève Cliquet-Tyrmi, Vice President

Sydney Farouze Conseil

30, rue de Galilée

75016 Paris

Tel: (33-1) 47.20.15.10 Fax: (33-1) 40.70.94.19

Contact: Mr. Sydney Farouze, General Manager

Edelman Public Relations Worldwide

54, rue de Monceau

75008 Paris

Tel: (33-1) 56.69.75.00 Fax: (33-1) 56.69.75.70

Contact: Mr. Philippe Cherel, Vice President Healthcare

5. Major Importers/Distributors

BIO MS

14, rue Magellan 75008 Paris

Tel: (33-1) 47.20.82.65 Fax: (33-1) 47.23.74.02

Contact: Mr. Kal Soubra, President

NM Medical

113, avenue de Verdun

92441 issy les Moulineaux Cedex

Tel: (33-1) 55.00.00.10 Fax: (33-1) 46.44.29.78

Contact: Mr. Antoine Rohart, Sales Director

Medidom

Route Nationale 4 54840 Gondreville Tel: (33-3) 83.63.69.25

Fax: (33-3) 83.63.93.05

Contact: Mr. Alain Barth, Director

Tetra Medical Laboratory P.A.E. Marenton - BP 142

01104 Annonay Cedex Tel: (33-4) 75.33.29.34 Fax: (33-4) 75.67.78.40

Contact: Mr. Thierry Bouet, Development Manager

E3S Medical Home Santé

205, avenue Charles de Gaulle 69160 Tassin la Demi-Lune Tel: (33-4) 72.38.36.00

Fax: (33-4) 72.59.08.96

Contact: Ms. Sophie Chanal, Director

6. Trade Promotion Opportunities

Trade shows

Exhibiting at a trade show in France is an ideal tool for penetrating the French market. For details on using the Commercial service to promote your products and services at a trade show, please contact the commercial specialist Alain Levy, at the Commercial Service office of the U.S. Embassy in Paris at (33) 1-43-12-29-02 or Alain.Levy@mail.doc.gov or contact the show organizer directly.

Name: Autonomic Sud 2001

Location: Toulouse Dates: May 2001

Frequency: Every other year

Organizer: Autonomie Développement Services (ADES)

Gerard Paillet, Exhibition Director

Centre d'Affaires le Lugo 15, rue du Docteur Roux 94600 Choisy le Roi Tel: (33-1) 48.00.05.20 Fax: (33-1) 46.81.77.00

Name: Mieux Vivre Grand Quest 2001

Location: Rennes

Dates: Sept. 27-29, 2001 Frequency: Every other year

Organizer: Autonomie Développement Services (ADES)

Gerard Paillet, Exhibition Director

Centre d'Affaires le Lugo 15, rue du Docteur Roux 94600 Choisy le Roi Tel: (33-1) 48.00.05.20 Fax: (33-1) 46.81.77.00

Name: Autonomic Paris 2002

Location: Paris Exposition, Porte de Versailles

Dates: June 2002

Frequency: Every other year

Organizer: Autonomie Développement Services (ADES)

Gerard Paillet, Exhibition Director

Centre d'Affaires le Lugo 15, rue du Docteur Roux 94600 Choisy le Roi Tel: (33-1) 48.00.05.20

Fax: (33-1) 46.81.77.00

Name: HANDICA - 2001

Location: Lyon

Dates: March 22-24, 2001 Frequency: Every other year

Organizer: PRH

Gilles Barbier, Exhibition Director

12, rue Cavenne 69007 Lyon

Tel: (33-4) 78.61.09.09 Fax: (33-4) 72.71.81.06

In addition, in the United States, MEDTRADE, the largest trade show worldwide for home healthcare, takes place annually. Medtrade featues over 250,000 products and over 1,100 exhibitors as well as organizes over 200 educational seminars on such subjects as sales, customer service, marketing, retailing strategies, and personal development. The Commercial Service each year promotes the event to international buying delegations from around the world and assists them in making contact with American exhibitors at MEDTRADE interested in exporting their products.

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